



**Testimony of Hilary Schneider, Maine Government Relations Director,
American Cancer Society Cancer Action Network**

**In Support of LD 653 “An Act To Provide Maine Residents Losing Employer-based Health
Coverage with Information about Other Coverage”**

March 16, 2021

Good afternoon, Senator Sanborn, Representative Tepler, and members of the Health Coverage, Insurance and Financial Services Committee. My name is Hilary Schneider and I am the Maine Government Relations Director for the American Cancer Society Cancer Action Network (ACS CAN). ACS CAN, the nonprofit, nonpartisan advocacy affiliate of the American Cancer Society, supports evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. As the nation’s leading advocate for public policies that are helping to defeat cancer, ACS CAN ensures that cancer patients, survivors, and their families have a voice in public policy matters at all levels of government.

I would like to thank you for this opportunity to submit the following testimony in support of LD 653.

This year, an estimated 10,090 Mainers will be diagnosed with cancer. For many of these individuals, their cancer care will extend over months, and sometimes even years.

Making sure cancer patients can access affordable coverage for the most appropriate treatment, as well as the care needed as a survivor, is critical to beating one’s cancer and making sure they can effectively treat any disease recurrence in the future. A study conducted by the American Cancer Society showed that people who are uninsured or underinsured are more likely to be diagnosed with cancer at its more advanced stages when treatment is more expensive and patients are more likely to die from the disease.

It is not uncommon for a cancer patient to need to go on medical leave or quit their job in order to focus on treating their cancer. The many appointments, sometimes needing to travel far distances, even including out-of-state, for treatment, as well as the side effects of the cancer or the treatments may make it too challenging or even impossible to work. For some cancer patients, fighting cancer becomes their full-time job. Other cancer patients may be able to continue working but may lose their job due to a layoff, like has happened to many Mainers in the past year from the economic impacts of COVID. If the cancer patient has obtained their health coverage through their employer, the loss of employment also results in loss of health coverage. Sometimes, this coverage is also for other members of their family. While some cancer patients may qualify for disability coverage, it often takes months for eligibility to be approved and coverage to start. For patients that do not qualify for disability coverage, their options may be limited as COBRA coverage is often very expensive and may be financially out of reach. A cancer diagnosis may be the cause of the patient losing job-based health insurance coverage, yet it is also likely the time when they need health coverage more than ever.



I was recently told the story of a Mainer that faced this situation. This woman had a stable job that was the source of her health insurance coverage. She was diagnosed with cancer and went on medical leave. Recently, her employer notified her that she would be losing her health insurance coverage. She could not afford COBRA. Her husband had lost his job due to COVID, but fortunately had just found a job so she was able to go on his insurance. A few months earlier and this would not have been the case. At times like these, knowing your options is not always easy. While some patients have access to patient navigators who help them navigate a cancer journey, this is not always the case and if the individual has always had job-based health coverage, they may not know what their options are and where to look.

This story hit close to home for me as my mother was a nurse and it was through her employer that my family received our health coverage. When she was diagnosed with breast cancer for the second time, her battle soon became too much for her to continue working. While I was only 11 years old at the time of her diagnosis, I clearly remember the stress that navigating health coverage and affording her treatment placed on my mother and father.

A recent [survey](#) of cancer patients and survivors found access to comprehensive health care that covers all necessary services—during the pandemic and beyond—is patients’ and survivors’ top health-related priority (51%), followed by the availability of such coverage should someone’s job change (20%). This is because cancer patients know that their survivability and quality of care can be related to their insurance coverage. Cancer is expensive and going without coverage is almost a guarantee of significant medical debt. While some uninsured cancer patients are able to negotiate discounts or qualify for charitable programs to help pay for their care, they are never guaranteed treatment. An uninsured cancer patient is responsible for all costs of their treatment, and many forego care due to cost.

LD 653 would make it easier for cancer patients who lose their job-based coverage to have readily available information about their options. Insurers are already required to communicate with patients when they are losing their coverage. The additional information that LD 653 would require in such communication lays out clear, actionable options by notifying the individual that:

- they may qualify for a special enrollment period for individual coverage
- the length of time for that special enrollment period and the dates by which they must apply for coverage
- they may be eligible for financial assistance in affording such coverage
- they may qualify for MaineCare and contact information for finding more information
- there is a toll-free number that they can call to get help with understanding their options for coverage and with applying for such coverage.

Losing one’s health coverage while undergoing cancer treatment is often extremely stressful. By passing LD 653, you could make navigating the loss of health coverage a little less stressful for cancer patients and could also potentially help ensure those patients retain adequate, affordable health coverage. For these reasons, we ask you to vote “ought to pass” on LD 653.

Thank you for your time and attention, as well as your consideration of our comments. I would be happy to answer any questions you may have about this testimony.

